

OREGON MEDICAID ADVISORY COMMITTEE
January 22, 2014
9:00am – 12:00pm
Mt. Mazama Conference Room
1225 Ferry Street SE; Salem, OR 97301

MEMBERS IN ATTENDANCE: Janet Patin, Karen Berkowitz, Leslie Sutton, Romnee Auerbach, Dick Stenson, Kay Dickerson, Carol Criswell
Rhonda Busek, Karen Gaffney, Tom Turek

MEMBERS ABSENT: Lenore Bijan, Mike Plunkett

PHONE PARTICIPANTS: Kristen Dillon

PRESENTERS: Rhonda Busek, OHA; Chris DeMars, OHA; MaiKia Moua, OHA; Bill Wright, Providence; OHA,

STAFF: Oliver Droppers, Jeannette Nguyen-Johnson

VISITORS: Ellen Lowe, Dan Eckton, Tamara Pedrojetti, Bridget Kiene, Ellen Miller

TOPIC	Key Discussion Points	Follow-up Action	Responsible Party
Opening Remarks and Staff Update	Introduction and roll call. Staff reviewed the agenda and the list of topics to cover.	NA	Co-Chair(s) & MAC staff
Approval of Minutes	The committee reviewed meeting minutes from December 11 th , 2013. A motion was made to approve the minutes. The motion was seconded; minutes were approved.	Post approved minutes	MAC
Oregon Health Authority Update –	<p>Rhonda Busek, Deputy Administrator, Oregon Health Authority (OHA), Medical Assistance Programs, provided updates on Oregon’s Health System Transformation.</p> <ul style="list-style-type: none"> • As of January 1st, 2014, there were 162,084 new enrollments in OHP • Phone calls regarding coverage have reached into the thousands per day, but are now starting to decrease. • Q: How is access to care going? A: CCOs are connecting folks with safety net partners, as well as with their own communities. • OHA, for now, is monitoring CCOs and their involvement in assisting OHP clients with accessing new providers and helping clients get stabilized • Q: Enrollment deadlines for Cover Oregon – is there a cutoff date for enrolling through Cover Oregon? A: There is an annual open enrollment period for exchange based coverage, so for Qualified Health Plans (QHPs). So if someone misses the annual open enrollment period, the individual may need to wait until the next enrollment period. The open enrollment period does not apply to the Oregon Health Plan (OHP). 		Rhonda Busek, OHA

<p>Oregon Health Transformation Center</p>	<p>Chris DeMars and MaiKia Moua, OHA, provided an overview on the Oregon Health Transformation Center (TC) and the work they are supporting:</p> <ul style="list-style-type: none"> • The Transformation Center was created to help support system innovation around the triple aim; they have four goals: promote transformation, build a learning network, spreading the coordinated care model beyond Medicaid and support internal transformation within OHA in conjunction with internal partners. • TC is working with data and analytics partners within OHA to make sure data pieces flow back and forth. • There are eight innovator agents that are required to serve as a single point of contact for the CCOs with OHA; they also help support CCOs innovation strategies in conjunction with the transformation plans that CCOs submit and help CCOs connect to the broader community; they are also required to participate in the community advisory council meetings. • The legislature passed the Transformation Fund Grant of \$30 million to support transformation within CCOs. • Senate Bill 1580 establishes that a CCO have at least one Community Advisory Council (CAC) to identify and advocate for preventive care practices to be used by the CCO. • The TC is charged with adopting a community health improvement plan to include scope of activity, services and responsibilities of the CCOs, and also must publish an annual progress report of the community health improvement plan (CHIP) • There are a total of 38 (CACs) around the state; some CCOs have multiple CACs • A brief overview was given of the two TC CAC surveys conducted in 2013 that included a brief summary of the CAC topics of interest, as well as the TC supports for the CACs in 2014 (various committees, learning community, leadership, technical assistance). • Q: Who will the steering committee consist of? A: The TC formulated a rotation schedule with the CCOs (eight CCOs and a liaison from the OHA Office of Equity & Inclusion and from the Public Health Division) to allow for equal representation. • Q: What is the role of the steering committee? A: They will be using the data from the surveys to develop an agenda for the learning community; they will be the focal point to help prioritize trainings, outreach, resources, etc. • Q: How has attendance been at the learning community meetings? A: 40-50. • Q: How are CAC members recruited and how diverse is this group? A: Recruitment varies, but the CACs have to be composed of OHP members and representatives of the community. • Q: Since there are such a high number of children on the OHP, how are they 		<p>Chris DeMars, OHA MaiKia Moua, OHA</p>
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	represented on the CACs? A: Parents/guardians of those children represent their interest on the councils.		
Oregon Health Study	<p>Bill Wright, PhD, Senior Research Scientist, Providence Center for Outcomes Research and Education (CORE), provided information on the Oregon Health Study (OHS).</p> <ul style="list-style-type: none"> • They have been doing research on healthcare access and coverage, particularly around low income and vulnerable populations around Oregon. • Bill has done two studies; first is the Oregon Health Study, which was designed to understand what happens with Medicaid expansion and what kind of outcomes to expect. The second is a study on Medicaid disenrollment designed to measure how common disenrollment was, historically, and how often those who left Medicaid return. • The purpose of the health study was to use the reservation list lottery as a seed for a randomized trial on the impact of Medicaid coverage relative to being uninsured; the data gathered also helps us understand more about churning. • Q: What are some of the factors that drive changes in income? A: There is a lot of seasonal employment and fluctuation/stability of employment. • Q: Is it fair to say that the top two reasons people left the program is that those folks left because of a misunderstanding of the rules or communications? A: possibly. • Findings indicated that among adults that disenrolled; most eventually re-enrolled once they realized they needed to or once they were finally able to navigate the process. • The results of the study speak to better communicating to people the requirements and dates of redetermination, more types of outreach. • Discussion around income fluctuation and continuity. • Q: When someone qualifies for Medicaid, how long do they qualify and what is the timeline for re-enrollment? A: Re-enrollment is currently set at every 12 months, with certain populations being waived. 		Bill Wright, Providence Center for Outcomes Research and Education
Enrollment Dynamics Between OHP and Exchange Coverage	<p>Staff reviewed/revised the language of the revised guiding principles and gave an overview of the differences in benefit coverage between OHP and the Qualified Health Plans (QHPs).</p> <ul style="list-style-type: none"> • Discussion around insurance options, immigration status and eligibility, affordability issues and support needs of the clients. • Suggestion made to change to wording in the second bullet point to not just support health care needs, but offer some sort of administrative/hands-on support. • Committee may want to consider other entities beyond just the Medicaid program and the Exchange as it looks at financial impacts. • Suggestion made to add language to the third bullet point that speaks to the 		Co-chairs; Staff

	<p>'delivery system.'</p> <ul style="list-style-type: none"> • Staff briefly compared the differences between OHP and the QHPs. 		
Public Comment	No public comment		
Adjourn	The meeting was adjourned at 12:00pm		Co-Chair(s)

Next MAC meeting:
February 26, 2014, 9:00am - 12:00pm
General Services Building; 1225 Ferry Street SE; Mt. Mazama Conference Room; Salem, OR